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CONFIRMATION NO. 1485

SERIAL NUMBER 09/963,736	FILING or 371(c) DATE 09/26/2001 RULE	CLASS 606	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. E-05-2	
APPLICANTS David C. Hovda, Mountain View, CA; Hira V. Thapliyal, Los Altos, CA; Philip E. Eggers, Dublin, OH; Maria B. Ellsberry, Fremont, CA;					
** CONTINUING DATA ***** This application is a DIV of 09/480,880 01/10/2000 PAT 6,659,106 which is a CIP of 09/054,323, 04/02/93 PAT 6,063,079 which is a CIP of 08/990,374 12/15/1997 PAT 6,109,268 which is a CIP of 08/485,219 06/07/1995 PAT 5,697,281 This application 09/963,736 09/26/2001 claims benefit of 60/075,059 02/18/1998					
** FOREIGN APPLICATIONS *****					
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/18/2001					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Initials]</i>		<input type="checkbox"/> Met after Allowance STATE OR COUNTRY CA	SHEETS DRAWINGS 18	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 1
ADDRESS ARTHROCARE CORPORATION 7500 Rialto Boulevard Building Two, Suite 100 Austin, TX 78735-8532 UNITED STATES					
TITLE Systems and methods for electrosurgical treatment of turbinates					
FILING FEE RECEIVED 680	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		